

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 2/23/04 2 Serial/Patent # 10/633,032

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	None	11/5/03	\$ 130.00
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ 130.00	
		8 TO BE REFUNDED BY:		
<input type="checkbox"/>	Treasury Check			
<input type="checkbox"/>	Credit Deposit A/C #:			
<input checked="" type="checkbox"/>	, <u>508 -- 088878</u>			
10 REASON:				
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:	
<input type="checkbox"/>	Duplicate Payment	<input type="checkbox"/>	<u>508 -- 088878</u>	
<input checked="" type="checkbox"/>	X No Fee Due (Explanation):			
<u>PTO lost the papers</u>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Paul Shanoski</u>		TITLE: <u>Attorney</u>		
SIGNATURE: <u>Paul Shanoski</u>		PHONE: <u>305-0011</u>		
OFFICE: <u>Ofc of Petitions</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****				
APPROVED: <u>John Kelly</u>		DATE: <u>2/23/04</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B